

Customer Service Center

Initial Patent Examination Division (703) 308-1202



# UNITED STATE DEPARTMENT OF COMMERCE Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS

Washington, D.C. 20231

FILING/RECEIPT DATE FIRST NAMED APPLICANT

ATTORNEY DOCKET NO./TITLE

09/481,730

01/11/00

ABOUL-HOSN

Ы

PA: 055

0242/0216

JONATHAN D SPANGLER ESQ A-MED SYSTEMS INC 2491 BOATMAN AVENUE WEST SACRAMENTO CA 95691

3773

**DATE MAILED:** 

02/16/00

# NOTICE TO FILE MISSING PARTS OF APPLICATION Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small entity in compliance with 37 CFR 1.27, or \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

to this NOTICE to avoid abandonment.	
If all required items on this form are filed within the period set above, the total amount owed by applicant as a	<b>1</b>
☐ 1. The statutory basic filing fee is: ☐ missing. ☐ insufficient.	
Applicant must submit \$ to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).	ent
claiming such status (37 CFR 1:27):  ☐ 2. The following additional claims fees are due:	का कांक करेंग्याच्या प्रदेशके कांक केंद्र के प्राप्त अवस्थि
\$fortotal claims over 20.	
\$independent claims over 3.	
\$for multiple dependent claim surcharge.  Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.	
3. The oath or declaration: is missing or unsigned.	
does not cover the newly submitted items.  An oath or declaration in compliance with 37 CFR 1. 63, including residence information and identifying the app the above Application Number and Filing Date is required.	
4 The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 C 1.43 or 1.47.	FR 1.42,
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.	- 
5. The signature of the following joint inventor(s) is missing from the oath or declaration:	<b>181730</b>
An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omit inventor(s), identifying this application by the above Application Number and Filing Date, is required.	
☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).	501026
7. Your filing receipt was mailed in error because your check was returned without payment.	
■ 8. The application was filed in a language other than English.  Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unle previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).	65.00 CH
□ 9. OTHER:	
Direct the reply and any questions about this notice to "Attention: Box Missing Parts."	ZEVDIE
A copy of this notice MUST be returned with the reply.	. ¥.,:

APR 1 0 2000 Photo

PTO/SB/17 (6/99)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 1999

Patent fees are *subject to* annual revision.

Small *Entity payments* <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See *Forms* PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

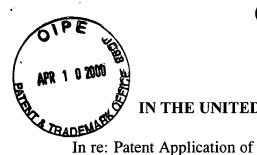
TOTAL AMOUNT OF PAYMENT

(\$)	65
ιΨ,	() <sub>-</sub>

<u>.' </u>	
C	omplete if Known
Application Number	09/481,730
Filing Date	January 11, 2000
First Named Inventor	Walid Aboul-Hosn
Examiner Name	N/A
Group /Art Unit	3738
Attorney Docket No.	PA:055

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)	
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	3. ADDITIONAL FEES Large Entity Small Entity Fee	Fee Paid
Deposit Account 50-1026	Code (\$) Code (\$)  105 130 205 65 Surcharge - late filing fee or oath	
Number 30-1020	_	\$65
Deposit Account A Mod Systems Inc	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.	\$0
Account Name A-Med Systems, Inc.	139 130 139 130 Non-English specification	\$0
Charge Any Additional Fee Required Under 37CFR§§ 1.16 and 1.17	147 2,520 147 2,520 For filing a request for reexamination	\$0
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action	\$0
Check Money Other	11 3 1,840* 11 3 1,840* Requesting publication of SIR after Examiner action	\$0
FEE CALCULATION	115 110 215 55 Extension for reply within first month	\$0
1. BASIC FILING FEE	116 380 216 190 Extension for reply within second month	\$0
Large Entity Small Entity	117 870 217 435 Extension for reply within third month	\$0
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118 1,360 218 680 Extension for reply within fourth month	\$0
101 760 201 380 Utility filing fee	128 1,850 228 925 Extension for reply within fifth month	\$0
106 310 206 155 Design filing fee	119 300 219 150 Notice of Appeal	\$0
107 480 207 240 Plant filing fee	120 300220 150 Filing a brief in support of an appeal	\$0 \$0
108 760 208 380 Reissue filing fee	121 260 221 130 Request for oral hearing	\$0
114 150 214 75 Provisional filing fee	138 1,510 1381,510 Petition to institute a public use proceeding	\$0
SUBTOTAL (1) (\$)	140 110 240 55 Petition to revive - unavoidable .  141 1.210 241 605 Petition to revive - unintentional	\$0
	142 1,210 242 605 Utility issue fee (or reissue)	<del></del>
2. EXTRA CLAIM FEES Fee from Fee Paid	143 430 243 215 Design issue fee	\$0
Extra Claims Delow	144 580 244 290 Plant issue fee	\$0
Independent - 3**= y	122 130 122 130 Petitions to the Commissioner	\$0
Claims	123 50 123 50 Petitions related to provisional applications	\$0
-or number previously paid, if greater; For Reissues, see below	126 240 126 240 Submission of Information Disclosure Stmt	\$0
Large Entity Small Entity	581 40 581 40 Recording each patent assignment per	\$0
Fee Fee Fee Fee Description Code (\$) Code (\$)	property (times number of properties)	\$0
103 18 203 9 Claims in excess of 20	146 760 246 380 Filing a submission after final rejection	Ψ0
102 78 202 39 Independent claims in excess of 3	(37 C.F.R § 1.129(a)) 149 760 249 380 For each additional invention to be	\$0
104 260 204 130 Multiple dependent claim, if not paid	examined (37 C.F.R § 1.129(b))	lso
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)	
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	
SUBTOTAL (2) (\$)	Reduced by Basic Filing Fee Paid SUBTOTAL (3)(\$) 65	
"SUBMITTED BY	Complete (if applicable)	
	Registration No.	0.7
Name (Print/Type) Jonathan D Spangle	(910) 373-740	
Signature 3/	Date April 3, 2000	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Box Missing Parts** 

Walid N. Aboul-Hosn et al.	) Group Art Unit: 3738
Application No.: 09/481,730	)
Filed: January 11, 2000	) Not Assigned )
For: METHODS AND SYSTEMS	)
FOR PROVIDING RIGHT AND/OR LEFT HEART SUPPORT DURING	)
CARDIAC SURGERY	)
I hereby certify that this correspondence is being deposited	l with the United States Postal Service as first class mail in an envelope

#### **RESPONSE TO NOTICE OF MISSING PARTS**

### **BOX Missing Parts**

Date:

Signed:

Assistant Commissioner for Patents Washington, D.C. 20231

Jonathan Spangler

### Sir:

In response to the Notice to File Missing Parts mailed February 16, 2000, having a shortened statutory period for response which expires April 16, 2000, please find the following documents:

- 1. Return Copy of Notice to File Missing Parts mailed February 16, 2000;
- 2. Executed Declaration for Utility Patent Application for U.S. Pat. App. Ser. No. 09/481,730, filed January 11, 2000;

- 3. Fee Transmittal, authorizing payment of \$65 for the late filing of the Declaration from Deposit Account 50-1026 established to A-Med Systems, Inc.;
- 4. Return Copy of Notice to File Missing Parts mailed February 16, 2000;
- 5. Transmittal Form enclosing the foregoing materials; and
- 6. Self-Addressed Return Receipt Postcard.

In the event that there are any questions concerning this submission or the application in general, the Examiner is invited to telephone the undersigned attorney so that prosecution may be expedited.

Respectfully submitted,

Jonathan D. Spangler Registration No. 40,182

A-Med Systems, Inc. 2491 Boatman Avenue West Sacramento, CA 95691 Tel: (916) 375-7400, Ext. 301

Cell: (916) 284-9078

April 3, 2000

RAP lease type a plus sign (+) inside this box --->



PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number,

1-0031	
<b>MERCE</b>	

		Application Number	09/481,730
TRANSMITTAL		Filing Date	January 11, 2000
FORM		First Named Inventor	Walid Najib Aboul-Hosn
(to be used for all correspondence after initial	l filing)	Group Art Unit	3738
		Examiner Name	N/A
Total Number of Pages in This Submission		Attorney Docket Numbe	rPA:055
	ENCLO	SURES (check all that ap	ply)
Fee Transmittal Form Fee Attached  Amendment / Response  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR	Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer  Small Entity Statement		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Additional Enclosure(s) (please identify below):  Self-Addressed Return Post Card (1 page).
1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name Jonathan Spangler Esq.  Signature Date April 3, 2000			
CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date April 3, 2000			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time yourse required to complete this form should be send to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date

April 3, 2000

Signature

Typed or printed name Jonathan Spangler, Esq